

Making a Difference



2019 Stephens County- BLT Youth In-depth Plan Summary

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Relevance

The high prevalence of childhood obesity in Texas is cause for concern because it is linked to negative health consequences for children and their families. Schools are uniquely positioned to have a positive impact on children's knowledge and behaviors associated with obesity. For example, vegetable exposure plus school gardening has been shown to improve consumption of fruits and vegetables. Adding more frequent and more vigorous physical activities during school has been shown to improve student fitness and weight. The home environment is also an important influence on a child's eating and healthy activity behaviors. The greater the frequency of vegetables consumption and physical activity by parents, the greater the consumption of these foods and exercise by their children. With child obesity rates among low-income children in Texas ranging from 10% to over 20%, engaging schools and families in prevention efforts is critical. Stephens County continues to rank poorly in Texas for health outcomes and in 2017 was 28% . This ranking represents the health of a county and one of the factors included in this ranking is obesity rates.

Response

To target this high prevalence of childhood obesity, Texas A&M AgriLife Extension Service in Stephens County partnered with Breckenridge Independent School District to implement the Learn, Grow, Eat & Go! (LGEG) curriculum in the five third grade classes at North Elementary school. A LGEG Task force was formed in 2018 when the program was first implemented and includes the school principal, the five third grade teachers, parents & Stephens County Commissioners.

The Learn, Grow, Eat, Go! Curriculum emphasizes science, math, language art/ reading, social studies and health through effective learning activities. The LGEG curriculum was designed to engage children and their families in school gardens, vegetable tastings, classroom activities and take-home family stories and includes:

- 10 weeks of in-class, TEKS aligned, lessons
- Classroom raised bed gardens
- Classroom vegetable tastings and food demonstrations
- Family stories for students to take home

Volunteers were recruited and utilized to help implement the program. The Stephens County Commissioners & parents assisted with the school gardens, food demonstrations, and curriculum activities.

Results

102 third grade students age 8-10 years old attended one or more of these sessions, and 100% completed pre and post evaluations.

Nutrition: Extension personnel and teachers led 9 vegetable tastings and food demonstrations to increase child preference. Child preference for vegetables is a high indicator for consumption of vegetables. The chart below shows the increase overall in the number of vegetables tried and the number liked before and after the program.

Vegetable Preference	Pre-Series	Post- Series	Percent Increase
Cauliflower	14.6%	42.1%	+27.5%
Bok Choy	8.8%	18.8%	+10%

- 57.3% participating in LGEG program, have you taught someone else how to make better food choices.
- 62.5% participation in the garden program made them want to come to school.
- 55.7% participants think gardening has helped them become a better math and science students.

Acknowledgements

Texas A&M AgriLife Extension Service in Stephens County would like to recognize Breckenridge Independent School District, H&H Garden, Stephens County Commissioners and North Elementary school aids for providing support to the LGEG program.

Interpretation and Future Programming

A summary of the results of the LGEG program was provided to the North Elementary Principal, and to the Stephens County Commissioners Court. LGEG will continue to be implemented in the Seymour Elementary School due to success of the program.

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VALUE

Better Living for Texans

These nutrition programs teach low-income audiences to prepare nutritious meals, stretch their food resources, improve their food-safety practices, and participate in regular physical activity. This not only improves the quality of life and reduces the risk of chronic disease for participants, but also lowers public health care costs.

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